28 U.S.C. SECTIONS 1332 AND 1441(a) [DIVERSITY JURISDICTION]; DEMAND FOR JURY TRIAL

Filed 07/31/2007

Page 1 of 23

Document 1

Case 3:07-cv-03913-JSW

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pursuant to the provisions of 28 U.S.C. section 1441, subdivision (a), in that it is a civil action wherein the matter in controversy exceeds the sum of \$75,000 exclusive of interest and costs, and is between citizens of different states.

- 4. The fact that the amount in controversy exceeds the minimum requirement for diversity jurisdiction can be determined by the nature and extent of damages alleged in the complaint. Plaintiff alleges that she was insured under an automobile insurance policy issued by State Farm with underinsured motorist (UIM) limits of \$250,000 per person and \$500,000 per accident. (Complaint, ¶¶7-8.) Plaintiff further alleges that, on or about October 13, 2004, she and her husband "were involved in an accident caused by an underinsured motorist at the intersection of Dolores and 23rd Street in San Francisco...," and that "Plaintiff and her husband were crossing the street within a crosswalk when a motorist operating an SUV hit and struck both of them." (Complaint, ¶12.) Plaintiff alleges that her husband was hospitalized for 19 days before he passed away as a result of injuries sustained in the accident, and that she herself suffered "substantial injuries," including physical injuries and emotional distress. (Complaint, ¶¶13-15.) Plaintiff also alleges that she settled with the underinsured driver of the SUV for the driver's policy limits of \$15,000, and made a claim to State Farm for payment of her UIM for the "...\$250,000 per person UM/UIM limits of the State Farm policy, less the \$15,000 limits received from the underinsured drivers motor vehicle liability insurance policy." (Complaint, ¶¶19, 21.)
- .5, Plaintiff alleges as special damages arbitration costs allegedly incurred in connection with the UTM arbitration proceeding and attorneys fees. (Complaint, ¶ 39.) Plaintiff's claim for attorney fees is an element of her special damages on a theory that plaintiff incurred these so-called Brandt fees to recover unreasonably withheld policy benefits. (Brandi v. Superior Court, 37 Cal.3d 813 (1985).)
- 6. Additionally, plaintiff asserts claims for general damages and punitive damages. The prayer for punitive damages is based on an alleged course of conduct from which

EXHIBIT 1

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	4 Tel.: (510) 547-7319 Fax: (510) 547-7320	ENDORSED FILED Sen Premoisco County Superior Count MAY 3 1 2007 GORDON PARK-LI, Clerk MENT CONFERENCESSET PARAM NATT Deputy Clerk 1 - 2 2007 - 9 MAM				
	Attorneys for Plaintiff KAREN LEE DEPARTMENT 212					
' '	SUPERIOR COURT OF THE STATE OF CALIFORNIA					
;	in and for the cour	TTY OF SAN FRANCISCO				
10	KAREN LEE	Case No. C & C - 87 - 463871				
1.1	Plaintiff	COMPLAINT FOR BREACH OF				
12	vs.	CONTRACT AND BREACH OF THE LMPLIED COVENANT OF GOOD FAITE				
13	STATE FARM MUTUAL AUTOMOBILE	AND FAIR DEALING				
14 15	through 50, inclusive.	TURY TRIAL DEMANDED				
15	Defendants					
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18	Plaintiff alleges as follows:					
19	1. At all times relevant herein, plainti	TKAREN LEE ("plaintiff") is and was an				
20	individual residing in the City and County of San I	Francisco, California				
21	2. Plaintiff is informed and believes as	nd thereupon alleges that, at all times relevant				
22	herein, defendent STATE FARM MUTUAL AUT	OMOBILE INSURANCE COMPANY was and				
23	is a corporation authorized to transact insurance bu	siness in, and doing business in, the State of				
24	California and the City and County of San Francisc	;o.				
25		d thereupon alleges that, at all times relevant				
26	herein, the true names, capacities and/or identities of					
27	DOES 1 through 50, whether individual, partnership					
28	unknown to plaintiff, who therefore sues such defer	dants by fictitious names. Plaintiff will amend				
	Complaint for Breach of ContractBreach of implied Covenant q	f Good Fatth - JURY TRIAL DEMANDED Page 1				

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---/ 26: her complaint to show such defendants' true names and capacities when they have been ascertained.

- 4. Plaintiff is informed and believes and thereupon alleges that, at all times relevant herein, each of the defendants sued and identified above acted and/or omitted to act as alleged herein, and/or conspired with, participated with and/or ratified the acts and/or omissions of the defendants sued herein, and each of them.
- S. Plaintiff is informed and believes and thereupon alleges that, at all times relevant herein, each of the defendants was the agent, servant, and/or employee of each of the remaining defendants and at all times were acting within the course and scope of such agencies and/or employment, each with the consent of the other.
- 6. In 2004, plaintiff and her husband, James Lee, were residents of San Francisco, California. As of October 2004, plaintiff and her husband had been married for 39 years and James Lee was the sole provider of financial support for the family.
- 7. In 2004, plaintiffs renewed a written policy of automobile insurance, Policy No. D620-652-056 ("the Policy"), issued by State Farm MUTUAL AUTOMOBILE INSURANCE COMPANY and DOES I through 10 (collectively, "State Farm") to plaintiffs. The policy was in full force and effect at all times relevant to this action, including, without limitation, on October 13, 2004.
- 8. The material terms of the Policy include the term that, in exchange for premiums paid by the Lees, State Farm would pay all damages that plaintiff and her husband were legally entitled to recover from the owner or operator of an uninsured motor vehicle because of bodily injury either individual sustained. Pursuam to the Policy, State Farm agreed that it would pay up to \$250,000.00 per person and \$500,000.00 per accident for bodily injury sustained by an insured in an accident with an uninsured motorist.
- 9. The Policy defines uninsured motorist to include an underinsured motorist, that is, a motorist who was insured for motor vehicle liability but who had an insurance policy with limits less than the \$250,000.00/500,000.00 uninsured/underinsured ("UM/UIM") limits of the Lees' State Farm automobile insurance policy.

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- 10. The insurance contract between the Lees and State Farm was formed and entered into in San Francisco County and was intended by the parties to be performed in that county.
- At all times relevant herein, the Lees paid all premiums due on the Policy and 11. otherwise complied with all terms and conditions of the Policy.
- 12. On or about October 13, 2004, while the Policy was in full force and effect, plaintiff and her husband were involved in an accident caused by an underinsured motorist at the intersection of Dolores and 23rd Street in San Francisco. Plaintiff and her husband were crossing the street within a crosswalk when a motorist operating an SUV hit and struck both of them.
- James Lee suffered severe injuries, including traumatic brain injuries, in the 13. accident. Mr. Lee was hospitalized for 19 days, until he passed away as the result of his injuries. Plaintiff also suffered substantial injuries, including a broken arm and head injuries, caused by the impact of the motor vehicle.
- Plaintiff contemporaneously wimessed the impact of the vehicle which smuck her 14. husband and subsequently resulted in his death. Before the impact, plaintiff observed her husband attempt to protect her from being struck by the vehicle.
- 15. At the time of the accident, James Lee, was the sole financial provider for his wife. Plaintiff also relied on her husband for emotional support, exre, comfort, society and companionship.
- 16, The driver of the SUV (hereafter, "the underinsured motorist") was solely at fault for the accident. The Lees did not cause or contribute to the accident. The Lees were crossing the street inside the marked crosswalk, and were complying with the electronic traffic signals controlling the intersection. The underinsured motorist unlawfully emerce the intersection against the traffic signal and struck the Lees, who were lawfully in the intersection.
- Following the accident, plaintiff and her husband were both transported to a local 17. hospital for emergency medical treatment. Plaintiff incurred the costs of emergency medical. transport and emergency bospital and medical expenses as a result of the treatment for her injuries caused in the accident.
 - Plaintiff notified her insurer, State Form, of the accident and of her potential claim 18.

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26 27 for uninsured/underinsured motorist benefits for the ascident. Plaintiff further requested from State Farm configuration of all coverages and benefits potentially available to her under the State Farm policy.

- 19. At the time of the arcident, the underinsured motorist had an automobile liability insurance policy with the stanutory minimum limits of coverage, namely, \$15,000.00 per person and \$30,000.00 per accident liability coverage. Plaintiff submitted a liability claim to the insurance carrier for the underinsured motorist and, after confirming that the driver had no other significant assets, settled with the driver for payment of the driver's liability insurance policy limits.
- 20. State Farm was notified of plaintiff's intention to settle with the underinsured motorist for payment of his policy limits. In January 2005, plaintiff gave State Farm written confirmation of the driver's liability insurance limits and the settlement of her claim against the driver for payment of those limits.
- 21. In Jamuary 2005, plaintiff also submitted a claim to State Farm for payment of her underinsured motorists claim, namely, for the \$250,000.00 per person UM/UIM limits of the State Farm policy, less the \$15,000.00 limits received from the underinsured driver's motor vehicle liability insurance policy.
- 22. Plaintiff promptly provided State Farm with documentation establishing the liability of the underinsured motorist and of the absence of any liability on the part of plaintiff or her husband. Plaintiff also provided State Farm with all of the information necessary for State Farm to investigate both liability and damages with respect to plaintiff's claim. Among other things, plaintiff provided State Farm with information concerning the nature and extent of plaintiff's injuries, documentation of the treatment she received and the medical expenses she incurred, and the names and identities of plaintiff's meating medical providers. Plaintiff also provided a description of the circumstances of the accident and her claims against the underinsured motorist.
- 23. At all times, plaintiff cooperated with State Farm and was willing to cooperate in any investigation by State Farm.
- 24. State Farm was aware at all relevant times that the accident had left her a widow and without the financial support and care and companionship of her husband. State Farm also was

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aware of the severity of plaintiff's own injuries and the expenses she incurred due to those injuries. State Farm also was aware that plaintiff witnessed the faral injuries sustained by her husband.

- 25. Despite the fact that plaintiff submitted her UIM claim and requested payment of the UIM/UIM limits, less the amount received from the underinsured motorist, State Farm undertook no substantive investigation of the claim. State Farm did not undertake to obtain a statement from plaintiff concerning the accident, her observation of the injuries to her husband, or her own injuries. Plaintiff is informed and believes and thereon alleges that State Farm conducted no substantive investigation to confirm the information and documentation that plaintiff provided to it.
- 26. Plaintiff complict with State Farm's requests for information even though State Farm requested information not relevant to its obligation to pay policy benefits to plaintiffs.
- 27. Notwithstanding its receipt of proof of the underinsured motorist's liability and plaintiff's damages in an amount in excess of its UM/UIM coverage limits. State Farm refused to promptly pay plaintiff the underinsured motorists benefits to which she was entitled. In so acting, State Farm refused to consider evidence favorable to plaintiff establishing that plaintiff's damages caused by the underinsured motorist exceeded the underinsured motorist limits of the Policy.
- 28. At the time State Farm failed and refused to pay plaintiff the policy benefits she was owed, State Farm knew that it was obligated to pay plaintiff the full uninsured motorist benefits provided by the Policy. State Farm knew plaintiff was experiencing significant and ongoing financial difficulties due to the injuries she sustained in the socident and the death of her husband. Plaintiff is informed and believes and thereon alleges that State Farm sought to use plaintiff's financial circumstances in order to coerce plaintiff to accept an amount less than the full policy benefits to which plaintiff was entitled.
- 29. Because State Form refused to pay the policy benefits owed to plaintiff and refused to competently or thoroughly investigate or evaluate plaintiff's claim for UIM benefits, plaintiff was forced to demand arbitration of her UIM claim. Due to State Faun's failure to pay plaintiff policy benefits that she was owed, plaintiff was forced to borrow money to support herself,
- 30. State Farm knew at the time arbitration was demanded that it was contractually obligated to pay plaintiff the limits of the uninsured motorist coverage for plaintiff's injuries.

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Plaintiff is informed and believes and thereop alleges that State Farm forced plaintiff into arbitration in order to coerce a more favorable settlement, to punish plaintiff for asserting her contractual rights and to delay payment of plaintiff's claim for benefits.

- 31. For a year after the accident, State Farm refused to pay any UIM benefits to plaintiff despite confirmation in January 2005 that plaintiff had a valid UIM claim and that State Farm had no defense of comparative fault applicable to plaintiff's claim against the underinsured motorist.
- 32. On or about October 15, 2005, more than a year after the accident, State Farm tendered to plaintiff \$10,000.00 as an "advance" of UM/UIM benefits. At the time State Farm made this purported advance, it was aware that plaintiff had incurred expenses, including medical expenses and the cost of emergency medical meatment, related to the accident which exceeded the amount of State Farm's payment. State Farm also was aware that plaintiff's other damages resulting from the accident for exceeded the amount of its payment.
- 33. State Farm refused without cause to pay plaintiff the policy benefits she was owed in order to delay plaintiff's recovery of the contractual benefits to which she was entitled, so that State Farm could benefit financially from the use of the money it owed plaintiff.
- 34. After plaintiff demanded arbitration, it remained alear that plaintiff's damages for bodily injury caused by an underinsured motorist exceeded the UIM bodily injury limits of the Policy issued by State Farm to plaintiff. Despite this fact, State Farm refused to pay plaintiff the uninsured motorist limits of the Policy.
- 35. After plaintiff demanded arbitration, State Farm continued to refuse to properly investigate and/or evaluate plaintiff's claim for underinauted motorist benefits. During this period, State Farm continued to ignore the plaintiff's request for payment of benefits, and the information which plaintiff had already provided to State Farm concerning her domages. State Farm also purported to conduct discovery to obtain information which either already had been provided to it by plaintiff, or which it could have obtained through the investigation it failed and refused to perform.
- 36. In May 2006, 19 months after the accident, State Farm made another nominal "advance" to plaintiff, in an amount grossly inadequate to compensate plaintiff for the damages she

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suffered as a consequence of her injuries and losses caused by the underinsured motorist. At the time this payment was made, the information which was and had been made available to State Farm demonstrated that plaintiff's damages exceeded the UIM limits of the State Farm policy, and far exceeded the purported advances made to date.

- 37. State Farm subsequently purported to tender the remaining UIM limits of the Policy to plaintiff.
- 38. As a result of State Farm's refusal to pay plaintiff the policy benefits she was owed at the time those benefits were owed, plaintiff has suffered substantial damage.
- 39. Plaintiff incurred substantial economic losses as a result of State Farm's refusal to pay policy benefits including, without limitation, loan fees and costs and the interest on borrowed money, loss of her husband's income, arbitration costs, attorneys fees and costs and the loss of interest on the unpaid policy benefits.
- 40. Plaintiff suffered and continues to suffer severe and lasting emotional distress as the result of State Farm's refusal to pay policy benefits in a timely manner. Plaintiff has suffered profound and extreme embarrassment, grief, humiliation, fear and worry, all as a direct result of the conduct of defendants, and each of them.
- 41. Plaintiff is informed and believes and thereon alleges that State Farm and its agents at all relevant times purposefully refused plaintiff's requests for payment of the benefits due to her under the Policy and in order to seerce a settlement for less than full value and/or otherwise compromise her claim subject to terms unfavorable to her. In so doing, State Farm has acted in willful disregard of plaintiff's rights under the Policy. State Farm knew and/or should have known that its actions would cause economic injury to plaintiff and cause plaintiff to suffer severe and lasting emotional distress, which plaintiff in fact suffered.

FIRST CAUSE OF ACTION BREACH OF CONTRACT

(Against STATE FARM and DOES 1 through 50)

42. Plaintiff hereby incorporates by reference Paragraphs 1 through 41 of this Complaint as though fully set forth berein.

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- 44. Plaintiff and her husband entered into a written insurance contract with defendant State Farm and Does 1 through 10 which provides coverage for damages which plaintiff and her husband were legally entitled to recover from the owner or operator of an underinsured motor vehicle.
- 45. Further, as with all contracts in the State of California, this insurance contract includes an implied covenant of good faith and fair dealing which requires defendants to place the interests of its insureds in obtaining policy benefits on the same level as its own interests, i.e., defendants have an obligation to give at least as much consideration to the interests of plaintiff as they do to their own.
- 46. At all relevant times herein, by performing all the conditions, covenants and promises in accordance with the terms and conditions of the Policy, plaintiff reasonably expected to be assured of "peace of mind" and financial and emotional security in the event of bodily injury and death caused by an underinsured motorist.
- 47. On or about October 13, 2004, while the Policy was in full force and effect, plaintiff sustained serious bodily injuries caused by an uninsured motorist and arising out of the ownership, operation and use of an underinsured motor vehicle. Plaintiff further suffered severe emotional distress and loss of the emotional and financial support, companionship and services as the result of bodily injuries and death suffered by her husband which arose out of the ownership, operation and use of an underinsured motor vehicle.
- 48. Plaintiff's damages were insured under the policy issued by State Farm, in an amount exceeding the UM/UIM limits of the Policy.
- 49. Defendants failed and refused to timely and fully tender their performance as required by the Policy by payment to plaintiff of all monies due and owing for damages caused by an underinance metarist in compliance with all of the terms of the Policy.
- 50. Defendants' failure and refusal to honor their contractual obligations includes, but is not limited to, intentionally delaying payment of benefits under and violating the provisions of the Policy covering bodily injury caused by an underinsured motorist; intentionally refusing and failing to pay the full amount of plaintiff's losses covered under the Policy; failing and intentionally

Complaint for Breach of Cantract/Breach of Implied Covenant of Good Feith - JURY TRIAL DEMANDED

Page 8

refusing to promptly investigate, evaluate and resolve plaintiff's claims; refusing to pay for losses covered under the Policy; delaying payments due under the Policy; and ignoring the covenant of good faith and fair dealing implied in every contract.

- 51. As a consequence of defendants' failure and refusal to timely perform its obligations under the Policy, plaintiff has suffered the following damages:
- a. Compensatory damages for failure to timely pay plaintiff the full value of all losses covered under the Policy.

SECOND CAUSE OF ACTION

BREACH OF THE COVENANT OF GOOD FAITH AND FAIR DEALING

(Against STATE FARM and DOES 1 through 50)

- 52. Plaintiff hereby incorporates by reference Paragraphs 1 through 51 of this Complaint as though fully set forth herein.
- 53. STATE FARM and Does 1 through 50 have wrongfully and intentionally withheld benefits due under the Policy by, inter alia, denying benefits due under the Policy; unreasonably delaying the payment of benefits due under the Policy at the time those benefits were due; and misrepresenting the terms of the Policy and defendants' obligations thereunder. Furthermore, this improper withholding of benefits due under the Policy was unreasonable and in bad faith, i.e., knowingly done without proper cause.
- 54. By committing the acts hereinabove alleged, defendants breached the covenant of good faith and fair dealing implied in the insurance contract. Defendants' acts of "bad faith" include, but are not limited to, the following:
 - Failing to investigate plaintiff's claims thoroughly, objectively or fairly:
- b. Ignoring and refusing to properly evaluate information favorable to plaintiff's claim without any reason for doing so;
 - Unreasonably denying benefits due under the Policy;
- d. Unreasonably delaying the payment and/or processing of plaintiff's claims by refusing and failing to pay benefits at the time they were due;
 - c. Refusing to consider information favorable to plaintiff's claims; and

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- f. Misrepresenting, concealing or failing to disclose the material terms of the Policy, plaintiff's rights under the Policy and defendants' obligations under the Policy.
- The conduct as outlined above demonstrates a failure or refusal to discharge 55. contractual responsibilities resulting not from honest mistake or negligence but rather by conscious and deliberate acts which unfairly frustrate the agreed common purposes and disappoints the reasonable expectations of the plaintiff, thereby depriving her of the benefits of the Policy.
- 56. In addition to the foregoing, defendants have committed acts in violation of Insurance Code section 790.03(h), which creates a presumption of breach of the implied covenant of good faith and fair dealing, including, but not limited to, the following:
- Misrepresenting facts and insurance policy provisions relating to any coverages at issue (Ins. Code §790.03(h)(1)):
- Failing to acknowledge and act promptly on communications with respect to claims (Ins. Code §790.03(h)(2));
- Failing to adopt and implement reasonable standards for prompt investigation of processing of claims (Ins. Code §790.03(h)(3));
- đ. Not attempting in good faith to effectuate prompt, feir and equitable settlement of claims in which liability has become reasonably clear (Ins. Code §790.03(h)(5)); and
- Compelling an insured to institute litigation to recover amounts due under an insurance policy by offering substantially less than the amount she was entitled to recover (Ins. Cod= §790.03(b)(6));
- 57. In addition to the foregoing, defendants have violated the California Department of Insurance Unfair Claims Sottlement Practices Regulations by acting as follows:
- Failing to respond to, and failing to provide a complete response to. communications from plaintiff regarding her claim within 15 days of the receipt of such communications (10 Cal. C. Regs. §2695.5(b));
- Failing to accept or deny claims, and affirm or deny liability within 40 days ь. after receipt of the notice of claim, unless they advise the claimants in writing of the reasons for delay, and thereafter of the reasons for further delay in writing every 30 days (10 Cal. C. Reas.

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- c. Failing to conduct and diligently pursue a thorough, fair and objective evaluation of plaintiff's claims (10 Cal. C. Regs. §2695.7(c));
- d. Persisting in seeking information not reasonably required for, or material to, the resolution of plaintiff's claims (10 Cal. C. Regs. §2695.7(c);
- e. Failing to pay claims within 30 days after coverage is determined (10 Cal. C. Regs, §2695.7(b));
- f. Falling to pay the undisputed amounts of claims within 30 days (10 Cal. C. Rogs. §2695.7(h));
- g. Attempting to settle a claim by making an unreasonable settlement offer (10 Cal. C. Regs.52695.7(g)); and
- h. Failing to specify reasons for needing additional time to determine whether a claim should be accepted and/or denied, including specification of any additional information the insurer requires in order to make the determination and providing written notice as to any continued reasons for the company's inability to make such a determination (10 Cal. C. Regs. §2695(b)).
- 58. In doing the aforementioned acts, defendants acted with malice, oppression, fraud and engaged in despicable conduct in conscious disregard of the rights of plaintiff. The conduct outlined above was the result of defendants acting for their own corporate and economic interests in knowing violation of its duties to plaintiff and with the intent to intimidate, threaten and pressure plaintiff into accepting less under the Policy than she is legally entitled to recover.
- 59. As a consequence of defendants' unjustified failure and refusal to timely perform their obligations under the Policy, plaintiff has suffered the following damages:
- 2. Compensatory damages for failure to promptly pay plaintiff's losses and all losses covered under the Policy;
- b. Compensatory damages for failure to promptly pay losses covered under the Policy;
- c. Consequential damages on all claims, including interest on the amounts owed by defendants to plaintiff at the time they were owed;

		·				
	1	d. Consequential damages for severe emotional distress;				
	2	c. Economic losses; and				
	3	f. Punitive damages for defendants' malicious and oppressive conduct in an				
	4	amount sufficient to punish defendants and deter it from committing similar conduct in the future				
	5	with respect to other insureds, in an amount to be proven at time of real.				
	6	WHEREFORE, plaintiff prays for relief as follows:				
	7	 For compensatory damages according to proof at time of trial; 				
	8	2. For consequential damages according to proof at time of trial; and				
	9	3. For punitive damages in an amount to punish and deter defendants' further conduct				
7	10	and from committing similar conduct in the future with respect to other insureds, in an amount to				
1	11	be proven at time of trial.				
1	12	4. For attorneys fees, costs of suit and interest; and				
I	∥د.	 For such other and further relief as the court deems appropriate. 				
1	4	Dated: May 30, 2007 MICHEL & FACKLER				
1	5	A Professional Corporation				
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1	7	Michael D. Michal, Esq.				
1	8	Attorneys for Plaintiff KAREN LEE				
1	9	TOTAL CONTACT A T. The Table of the Transfer.				
2	0	JURY TRIAL DEMANDED				
2	ı	Plaintiff KAREN LEE hereby demands a jury trial on all claims and causes of action				
23	2∥ €	esserted berein.				
23	3 I	Dated: May 30, 2007 MICHEL & FACKLER				
24	-	A Professional Corporation				
25		- <u> </u>				
26		By Michael D. Michel, Esq.				
27		Automoys for Plaintiff KAREN LEE				

EXHIBIT 2

STEPHEN M. HAYES (SBN 83583) STEPHEN P. ELLINGSON (SBN 136505) MELISSA A. WURSTER (SBN 198899) HAYES DAVIS BONINO ELLINGSON MCLAY & SCOTT, LLP 203 Redwood Shores Parkway, Suite 480 Redwood Shores, California 94065 Telephone: 650.637.9100 4 Facsimile: 650.637.8071 5 Attorneys for Defendant STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY 6 7 SUPERIOR COURT OF THE STATE OF CALIFORNIA 8 FOR THE COUNTY OF SAN FRANCISCO 9 KAREN LEE. Case No.; CGC-07-463871 10 Plaintiff, STATE FARM MUTUAL AUTOMOBILE 11 INSURANCE COMPANY'S ANSWER TO 12 COMPLAINT STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY; and DOES 1 13 through 50, inclusive, 14 Defendants. 15 16 Defendant State Farm Mutual Automobile Insurance Company, in answer to the unverified 17 Complaint of plaintiff herein, denies each and every, all and singular, the allegation of the 18 unverified Complaint, and in this connection defendant denies that plaintiff has been injured or 19 damaged in any of the sums mentioned in the Complaint, or in any sum, or at all as the result of any 20 act or omission of this answering defendant. 21 AS A FIRST, SEPARATE AND AFFIRMATIVE DEFENSE TO THE COMPLAINT ON 22 FILE HEREIN, AND TO EACH ALLEGED CAUSE OF ACTION CONTAINED THEREIN, this 23 answering defendant alleges that said complaint fails to state facts sufficient to constitute a cause of 24 25 action against this answering defendant. AS A SECOND, SEPARATE AND AFFIRMATIVE DEFENSE TO THE COMPLAINT 26 ON FILE HEREIN, AND TO EACH ALLEGED CAUSE OF ACTION CONTAINED THEREIN, 27 28 this answering defendant alleges that at all times and places mentioned in the Complaint herein. 143311

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plaintiff failed to mitigate the amount of her damages. The damages claimed by plaintiff could have been mitigated by due diligence on her part or by one acting under similar circumstances.

Plaintiff's failure to mitigate is a bar to her recovery under the Complaint.

AS A THIRD, SEPARATE AND AFFIRMATIVE DEFENSE TO THE COMPLAINT ON FILE HEREIN, AND TO EACH ALLEGED CAUSE OF ACTION CONTAINED THEREIN, this answering defendant alleges on information and belief that the sole and proximate cause of the circumstances and events complained of by plaintiff in the Complaint was due to the acts or omissions of persons and entities other than this answering defendant.

AS A FOURTH, SEPARATE AND AFFIRMATIVE DEFENSE TO THE COMPLAINT ON FILE HEREIN, AND TO EACH ALLEGED CAUSE OF ACTION CONTAINED THEREIN, this answering defendant alleges that the Complaint is barred by the doctrine of estoppel.

AS A FIFTH, SEPARATE AND AFFIRMATIVE DEFENSE TO THE COMPLAINT ON FILE HEREIN, AND TO EACH ALLEGED CAUSE OF ACTION CONTAINED THEREIN, this answering defendant alleges that said complaint fails to state facts sufficient to constitute a claim for exemplary or punitive damages pursuant to §3294 of the Civil Code.

AS AN SIXTH, SEPARATE AND AFFIRMATIVE DEFENSE TO THE COMPLAINT ON FILE HEREIN, AND TO EACH ALLEGED CAUSE OF ACTION CONTAINED THEREIN, this answering defendant alleges that plaintiff's Complaint, to the extent that it seeks exemplary or punitive damages pursuant to §3294 of the Civil Code, violates defendant's right to procedural due process under the Fourteenth Amendment of the United States Constitution, and the Constitution of the State of California, and therefore fails to state a cause of action upon which either punitive or exemplary damages can be awarded.

AS A SEVENTH, SEPARATE AND AFFIRMATIVE DEFENSE TO THE COMPLAINT ON FILE HEREIN, AND TO EACH ALLEGED CAUSE OF ACTION CONTAINED THEREIN, this answering defendant alleges that plaintiff's Complaint, to the extent that it seeks punitive or exemplary damages pursuant to §3294 of the Civil Code, violates defendant's rights to protection from "excessive fines" as provided in the Eighth Amendment of the United States Constitution and Article I, Section 17, of the Constitution of the State of California, and violates defendant's rights to 143311

substantive due process as provided in the Fifth and Fourteenth Amendments of the United States 1 Constitution and the Constitution of the State of California, and therefore fails to state a cause of 2 action supporting the punitive or exemplary damages claimed. 3 WHEREFORE, this answering defendant prays for judgment as follows: 4 1. That plaintiff take nothing by the Complaint; 5 2. For costs of suit incurred herein; and 6 3. For such other and further relief as the Court deems proper. 7 8 HAYES DAVIS BONINO ELLINGSON 9 Dated: July 31, 2007 MCLAY & SCOTT, LLP 10 11 By: 12 STEPHEN P. ELLINGSON 13 MELISSA A. WURSTER Attorneys for Defendant STATE FARM MUTUAL AUTOMOBILE 14 INSURANCE COMPANY 15 16 17 18 19 20 21 22 23 24 25 26 27 28 143311

1 CASE NAME: Lee (Karen) v. State Farm ACTION NO.: CGC-07-463871 2 PROOF OF SERVICE 3 I am a citizen of the United States. My business address is 203 Redwood Shores Parkway, Suite 480, Redwood Shores, California 94065. I am employed in the County of San Mateo where this service occurs. I am over the age of 18 years, and not a party to the within cause. I am readily familiar with my employer's normal business practice for collection and processing of correspondence for mailing with the U.S. Postal Service, and that practice is that correspondence is deposited with the U.S. Postal Service the same day as the day of collection in the ordinary course 6 of business. 7 On the date set forth below, following ordinary business practice, I served a true copy of the foregoing document(s) described as: 8 STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY'S 9 ANSWER TO COMPLAINT 10 (BY FAX) by transmitting via facsimile the document(s) listed above to the fax 11 number(s) set forth below, or as stated on the attached service list, on this date before 5:00 p.m. 12 (BY MAIL) I caused such envelope(s) with postage thereon fully prepaid to be × placed in the United States mail at Redwood Shores, California. 13 (BY PERSONAL SERVICE) I caused such envelope(s) to be delivered by hand 14 this date to the offices of the addressee(s). (BY OVERNIGHT DELIVERY) I caused such envelope(s) to be delivered to an 15 overnight delivery carrier with delivery fees provided for, addressed to the person(s) on whom it is to be served. 16 17 Michael D. Michel, Esq. Jeff M. Fackler, Esq. 18 MICHEL & FACKLER 2000 Powell Street, Suite 1000 19 Emeryville, CA 94608 Telephone: 510.547.7319 20 Facsimile: 510.547,7320 21 Attorney for Plaintiff KAREŇ LEE 22 (State) I declare under penalty of perjury under the laws of the State of California 23 that the above is true and correct. 24 Executed on July 31, 2007 at Redwood Shores, California. .25 26 27

1		NNO.:					
2		PROOF OF SERVICE					
3	·						
4	I am a citizen of the United States. My business address is 203 Redwood Shores Parkway, Suite 480, Redwood Shores, California 94065. I am employed in the County of San Mateo where this service occurs. I am over the age of 18 years, and not a party to the within cause. I am readily						
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6	of busin						
. 8	On the date set forth below, following ordinary business practice, I served a true copy of the foregoing document(s) described as:						
9	STATE FARM MUTUAL AUTOMOBILE INSURANCE COMPANY'S NOTICE OF						
10		REMOVAL OF CIVIL ACTION UNDER 28 U.S.C. SECTIONS 1332 AND 1441 [DIVERSITY JURISDICTION]; DEMAND FOR JURY TRIAL					
11		(BY FAX) by transmitting via facsimile the document(s) listed above to the fax					
12		number(s) set forth below, or as stated on the attached service list, on this date before 5:00 p.m.					
13	. 🗷	(BY MAIL) I caused such envelope(s) with postage thereon fully prepaid to be placed in the United States mail at Redwood Shores, California.					
14		(BY PERSONAL SERVICE) I caused such envelope(s) to be delivered by hand this date to the offices of the addressee(s).					
15 16		(BY OVERNIGHT DELIVERY) I caused such envelope(s) to be delivered to an overnight delivery carrier with delivery fees provided for, addressed to the person(s) on whom it is to be served.					
17							
18		Michael D. Michel, Esq. Jeff M. Fackler, Esq. MICHEL & FACKLER					
19		2000 Powell Street, Suite 1000 Emeryville, CA 94608					
20		Telephone: 510.547.7319 Facsimile: 510.547.7320					
21		Attorney for Plaintiff					
22		KAREN LEE					
23	×	(Federal) I declare under penalty of perjury under the laws of the State of					
24		California that the above is true and correct.					
25	F	Executed on July 31, 2007 at Redwood Shores, California.					
.26	ı	(Spirael Common					
27		/ Abigail Bowman					
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PROOF OF SERVICE